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Substitute for form 1449A/B/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)			<b>Complete if Known</b>		
			Application Number	10/817,013	
			Filing Date	April 2, 2004	
			First Named Inventor	Dethe Elza	
			Art Unit	2171 2178	
			Examiner Name	Not Yet Assigned Manglesh	
Sheet	1	of	3	Attorney Docket Number	413478002US

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Examiner Initials*	Cite No.†	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	<i>Manglesh</i>	Date Considered	08/01/07
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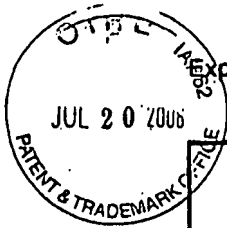
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		Art Unit	2171 2175
		Examiner Name	Not Yet Assigned <i>Mangloek</i>
Sheet 2 of 3	Attorney Docket Number	413478002US	

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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. \*\*CITE NO.: Those patent(s) or publication(s) which are marked with an double asterisk (\*\*) next to the Cite No. are not supplied because they were previously cited by or submitted to the Office in a prior application relied upon in this application for an earlier filing date under 35 U.S.C. 120. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04.

Examiner Signature	<i>Mangloek</i>	Date Considered	08/01/07
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		Art Unit	2771 2178		
		Examiner Name	Not Yet Assigned <i>Manglish Patel</i>		
Sheet	3	of	3	Attorney Docket Number	413478002US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
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<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature	<i>Manglish Patel</i>	Date Considered	08/01/07
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